.IE	RNAL TRANSF	REQUEST FOR S.N.	09/5	
DATE:	5/11/00	FROM:	· · · · · · · · · · · · · · · · · · ·	(print name)
		REASON(S):		
FORWARD TO:		A. You had Parent	(check box)	
A. Art Unit:	2736	B. See Title	(check box)	
B. Class:	340	_ C. See Abstract	(check box)	•
C Subclass:	310+	D. See Claim(s):		
	XPLANATION IF NEI			
Claim	rs an dix	cted to power	T 1000 Sooris 8000	s lines q
			on work (at or)	
DATE:		FROM:		(print name)
		REASON(S):		•
FORWARD T	o: ˈ	A. You had Parent	(check box)	
A. Art Unit:		B. See Title	(check box)	:
B. Class:		C. See Abstract	(check box)	
C Subclass:		D. See Claim(s):		
DATE:		FROM:		(print name)
. EODWADD T	O CLASSIFIER	REASON(S): A. You had Parent	(44.44.44.4	
TORWARD	C OLAGOII ILK	B. See Title	(check box)	•
	20	C. See Abstract	(check box)	. •
		D. Soo Claim(s):		
	(PLANATION IF NEE			
FUNTHEREA	CPLANATION IF INCE	:DED:		
	<i>i</i> .			
DISPOSITION	ON BY 2700 CLA	SSIFICATION		
DATE:		CLASSIFIER:		
		REASON(S):		
FORWARD T	0:	A. You had Parent	(check box)	
A. Art Unit:		B. See Title	(check box)	
B. Class:	·	C. See Abstract	(check box)	
C Subclass:		D. See Claim(s):		

FURTHER EXPLANATION IF NEEDED: